

INDIANO VAUGHAN LLP

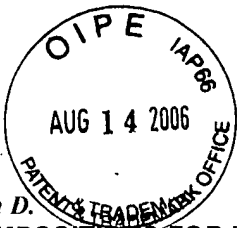
08-15-06

IFW 1618 \$

One North Pennsylvania Street, Suite 850
Indianapolis, Indiana 46204
Phone 317-822-0033; Fax 317-822-0055

PATENT APPLICATION

Group: 1618
Att'y Docket: 7419-0118
Applicant: ROSE, Seth D.
Title: **METHOD AND COMPOSITIONS FOR IN SITU INFORMATION OF PROTECTIVE AND/OR MEDICATED FILMS ON BODY TISSUE**
Serial No.: 09/509,237
Filed: 20 March 2000
Examiner: Fugara, Blessing M.



Box Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

| Certificate of Express Mailing Under 1.10 | |
|---|------------------|
| I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service as "Express Mail, Post Office to Addressee" by the certificate number set forth below, in an envelope addressed to: | |
| Mail Stop Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | |
| Date: | 14 August 2006 |
| Signature: | Marianne E. Ries |
| Exp. Cert. No.: | EV878932029 US |
| Deposit Account: The Commissioner is hereby authorized to deduct any defect or deficiency in fee, or credit any overpayment to: Deposit Account No. 50-1590 | |

Dear Sir:

Transmitted herewith is a response in the above-identified application:

The fee has been calculated as shown below:

| CLAIMS AS AMENDED | | | | | | | |
|---------------------------------|----------------------------------|---------------------------------|--------------|--------------|---------|--------------|---------|
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NO. PREVIOUSLY PAID FOR | NUMBER EXTRA | SMALL ENTITY | | OTHER | |
| TOTAL CLAIMS | 1 | 20 | 0 | Rate x \$25 | \$ 0.00 | Rate x \$50 | \$ 0.00 |
| INDEP. CLAIMS | 1 | 3** | 0 | Rate x \$100 | \$ 0.00 | Rate x \$200 | \$ 0.00 |
| TOTAL FEE FOR ADDITIONAL CLAIMS | | | | | | \$ 0.00 | |

- * If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.
** If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

X An Extension of Time for 1 month (or however many months is necessary) is hereby requested under 37 C.F.R. 1.136(a).
The required fee for filing this extension is: \$ 60.00

TOTAL FEE FOR THIS AMENDMENT

\$ 60.00

X A check in the amount of \$60.00 to cover the total fee for this amendment is attached.

X Applicant asserts that it is entitled to Status as Small Entity Under 37 C.F.R. 1.27.

The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees under 37 C.F.R. 1.17 which may be required during the prosecution of this application, or credit of any overpayment, to E. Victor Indiano's Deposit Account No. 50-1590. A duplicate copy of this sheet is enclosed.

08/16/2006 GWORDF1 00000064 09509237

01 FC:2251

60.00 OP

Attorney of Record
Printed Name: E. Victor Indiano
Registration No.: 30,143